FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	356223	
<015>	Study Area Name	Allamakee-Clayton Electric Cooperat:	ive, Inc
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Dave Decker	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5638647641 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	ddecker@acrec.coop	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code			356223								
<015>	15> Study Area Name			Allamakee-C	layton Electric Co	ooperative, Inc						
<020>	> Program Year			2018								
<030>	<030> Contact Name - Person USAC should contact regarding this data			Dave Decker	Dave Decker							
<035>	35> Contact Telephone Number - Number of person identified in data line <030>			30> <sup>5638647641</sup>	5638647641 ext.							
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>			30> ddecker@acr	ddecker@acrec.coop							
<210>	10> For the prior calendar year, were there any reportable voice service o			ice outages?	No							
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

-	fulfilled Service Request lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. July 2013	3060-0819
.010:	St. d. Avy. Sylv		25,002			
<010>	Study Area Code		356223			
<015>	Study Area Name		Allamakee-Clayton Electric Cooper	rative, inc		
<020>	Program Year		2018			
<030> Contact Name - Person USAC should contact regarding this data		Dave Decker				
<035> Contact Telephone Number - Number of person identified in data line <030>		5638647641 ext.				
<039>	Contact Email Address - Email Address of person idea	ntified in data line <030>	ddecker@acrec.coop			
<300> U	Infulfilled service request (voice)		NA			
<310> [	Detail on attempts (voice)					
		Nam	ne of Attached Document			
<320>	Unfulfilled service request (broadband)		0			
<330>	Detail on attempts (broadband)					
	• • • • • • • • • • • • • • • • • • • •		Name of Attached Document			

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should cont	act regarding this data  Dave Decker
<035>	Contact Telephone Number - Number of p <030>	person identified in data line 5638647641 ext.
<039>	Contact Email Address - Email Address of <030>	person identified in data line ddecker@acrec.coop
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or o	e telephony service in the prior No voice services offered h you are designated an ETC for
<410>	Complaints per 1000 customers for fixed v	oice
<420>	Complaints per 1000 customers for mobile	e voice
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or gro the prior calendar year for each service ar an ETC for any facilities you own, operate,	eater) for broadband service in Offered only fixed broadband ea in which you are designated
<440>	Complaints per 1000 customers for fixed by	proadband 0.0
<450>	Complaints per 1000 customers for mobile	e broadband

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	356223	
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop	
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	
		356223iaServiceQuality510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	356223iaEmergencyCertification610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	356223	
<015> Study Area Name	Allamakee-Clayton Electric Cooperative, Inc	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Dave Decker	
<035> Contact Telephone Number - Number of person identified in data	line <030> 5638647641 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> ddecker@acrec.coop	
<701> Residential Local Service Charge Effective Date  1/1/2017  702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
ſ					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
•									
									+
									-
					Soo at	tached worksheet			
					<del> at</del>	<del>lacheu wornsneet</del>			
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	LI CONTRACTOR OF THE CONTRACTO		•						•

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attac	hed				
				worksheet -	1				

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		356223
<015>	Study Area Name		Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year		2018
<030>	Contact Name - Person U	ISAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - E	Email Address of person identified in data line <030>	ddecker@acrec.coop
<810>	Reporting Carrier	Allamakee-Clayton Electric Cooperative, Inc.	
<811>	Holding Company	Not Applicable	
<812>	Operating Company	NA	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
•			
•			
	See atta	ched worksh	et
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(900) Tribal Lands Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
	·
<010> Study Area Code	356223
<015> Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Dave Decker
<035> Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop
<900> Does the filing entity offer tribal land services? (Y/N)	No
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes	25
to confirm the status described on the attached PDF, on line 920,	
demonstrates coordination with the Tribal government pursuant to	Select
§ 54.313(a)(9) includes:	Yes or No or
	Not Applicable
<921> Needs assessment and deployment planning with a focus on Tribal	
community anchor institutions.	
<922> Feasibility and sustainability planning;	
<923> Marketing services in a culturally sensitive manner;	
<924> Compliance with Rights of way processes	
<925> Compliance with Land Use permitting requirements	
<926> Compliance with Facilities Siting rules	
<927> Compliance with Environmental Review processes	
<928> Compliance with Cultural Preservation review processes	
<929> Compliance with Tribal Business and Licensing requirements.	

(1000) Voice and Broadband Service Rate Comparability				FCC Form 481
Data Coll	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code		356223	
<015>	Study Area Name		Allamakee-Clayton Electric Cooperativ	e, Inc
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Dave Decker	
<035>	Contact Telephone Number - Number of person identified in data line <	030>	5638647641 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <	<030>	ddecker@acrec.coop	
<1000>	Voice services rate comparability certification	Not	Applicable	
<1010>	Attach detailed description for voice services rate			
	comparability compliance			
			Name of Attached Document	t
		T	Pod odnosta o o o o o o o o o o o o o o o o o o o	
<1020>	Broadband comparability certification		Wireline Competition Bureau	most recent applicable benchmark announced by
10202	broadband comparability certification	0110	Wilding competition bareau	
<1030>	Attach detailed description for broadband			
	comparability compliance			
			Name of Attached Documen	it .

	o Terrestrial Backhaul Reporting lection Form			FCC Form 481 OMB Control No July 2013	. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	356223			
<015>	Study Area Name	Allamake	e-Clayton Electric Coop	perative, Inc	
<020>	Program Year	2018			
<030>	Contact Name - Person USAC should contact regarding this data	Dave Dec	ker		
<035>	Contact Telephone Number - Number of person identified in data line <030>	56386476	41 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@	acrec.coop		
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	[3	⁄es		
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps			

(1200) Te	rms and Condition for Lifeline Customers	FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
<b>Data Coll</b>	ection Form	July 2013
<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop
	Г	356223IALifeline1210.pdf
		JJOZZZIABITCIINCIZIV. PAL
.4240:	Tanas O Candillian of Water Talanka a Ufalian Diag	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
	•	Name of Attached Document
412205	w. L. S. Ir. w. L. v.	
<1220>	Link to Public Website HTTP	
	<del>-</del>	
"Planca cl	neck these boxes below to confirm that the attached document(s), on line 1210,	
	bsite listed, on line 1220, contains the required information pursuant to	
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must	
annually r	eport.	
<1221>	Information describing the terms and conditions of any voice	
	telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
11222	Details on the number of fillitutes provided as part of the plan,	
	_	
<1223>	Additional charges for toll calls, and rates for each such plan.	

Data Col	ice Cap Carrier Additional Documentation lection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	356223	
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

### **Incremental Connect America Phase I reporting**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in		
<2023>	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

Data Collection Fo	Carrier Additional Documentation orm Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}			
(3010B)	Please Provide Attachment	Name of Attached Docui	ment Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	mornace.		
(3012B)	Please Provide Attachment	Name of Attached Docui	ment Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	0 0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	0 0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports			
	(Operating Report for Telecommunications Borrowers)		<del>_</del>	
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docui Information	ment Listing Required	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	0 0	
	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS			
(3020)	Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission on line			
(3022)	3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Docui Information	ment Listing Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop

Financial Data Summary	
•	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(,	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data I	ine <030> ddecker@acrec.coop

### **4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

### Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Yes

### Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

No - No New Anchors

### If yes to 4003A, please provide a response for 4003B.

**4003b.** Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

**4003b**. Provide the number, names and addresses Name of Attached Document Listing Required Information

### **Broadband Deployment Locations – FCC 14-98 (paragraph 80)**

**4004a**. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information

**4004b**. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

Name of Attached Document Listing Required Information

356223ia4004b.pdf

356223ia4004a.xlsm

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

## Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment

under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.

ddecker@acrec.coop

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

<035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030>

I certify that (Name of Agent) <u>Consortia Consulting</u> also certify that I am an officer of the reporting carrier; my ragent; and, to the best of my knowledge, the reports and da	is authorized to submit the information reported on behalf of the reporting carrier. I onsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized rovided to the authorized agent is accurate.
Name of Authorized Agent: Consortia Consulting	
Name of Reporting Carrier: Allamakee-Clayton Elect:	Cooperative, Inc
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2017
Printed name of Authorized Officer: David Decker	
Title or position of Authorized Officer: Director of Finan	À Admin Services
Telephone number of Authorized Officer: 5638647611 ext.	
Study Area Code of Reporting Carrier: 356223	Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be	ished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment der Title 18 of the United States Code, 18 U.S.C. § 1001.

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Beh	alf of Reportin	g Carrier
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients or the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported		
Name of Reporting Carrier: Allamakee-Clayton Electric Cooperative, Inc		
Name of Authorized Agent Firm: Consortia Consulting		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/26/2017
Name of Authorized Agent Employee: Judy Christiansen		
Title or position of Authorized Agent or Employee of Agent Consultant		
Telephone number of Authorized Agent or Employee of Agent: 4028181322 ext.		
Study Area Code of Reporting Carrier: 356223 Filing Due Date for this form: 07/03/2017		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 18 of the United States Code, 18 U.S.C. § 1001.	C. §§ 502, 503(b), or	fine or imprisonment under Title



(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop
<701>	Residential Local Service Charge Effective Date 1/1/2017	

<703>

<702> Single State-wide Residential Local Service Charge

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
IA	0	(0210)	FR	0.0	0.0	0.0	0.0	0.0

(710) Broadband Price Offerings	
Data Collection Form	

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	356223
<015>	Study Area Name	Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Dave Decker
<035>	Contact Telephone Number - Number of person identified in data line <030>	5638647641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ddecker@acrec.coop

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	· <d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	IA	All	49.99	0.0	40.00	(Mbps) 5.0	1.0	999999	Other, No limit on usage allowance
	IA	All	69.99	0.0	49.99 69.99	10.0	2.0	999999	Other, No limit on usage allowance
	IA	All	99.99	0.0	99.99	15.0	3.0	999999	Other, No limit on usage allowance
	IA	All	149.99	0.0	149.99	20.0	5.0	999999	Other, No limit on usage allowance
							<u> </u>		

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		356223
<015>	Study Area Name		Allamakee-Clayton Electric Cooperative, Inc
<020>	Program Year		2018
<030>	Contact Name - Person USA	AC should contact regarding this data	Dave Decker
<035>	5> Contact Telephone Number - Number of person identified in data line <030>		5638647641 ext.
<039>	O39> Contact Email Address - Email Address of person identified in data line <030>		ddecker@acrec.coop
<810>	Reporting Carrier	Allamakee-Clayton Electric Cooperative, Inc	c
<811>	Holding Company	Not Applicable	
<812>	Operating Company	NA	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	Allamakee-Clayton Electric Cooperative, Inc.	356220	
_	Allamakee-Clayton Electric Cooperative, Inc.	356221	
_	Allamakee-Clayton Electric Cooperative, Inc.	356222	
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### **Allamakee-Clayton Electric Cooperative**

### Certification of Compliance with Applicable Service Quality Standards and Consumer Protection Rules

lowa Administrative Code §199-22.6 requires an ETC to certify in its annual report that it is complying with applicable service quality standards and consumer protection rules. Following are procedures that the company follows to comply with the rules.

### **Service Quality Standards**

The Company currently does not provide voice services.

### The Company:

- Advertises the availability of its services and the charges using media of general distribution and/or on its website.
- Maintains a business office providing customers with access to a customer service representative either in person or via a local telephone call or toll-free telephone number during business hours.
- Directs after hour calls to the Company's help desk.
- Directs trouble reports to the on-call technician.
- Tracks all service orders to ensure they are completed in a timely manner.
- Measures its service connection and service interruption performance on a regular basis.
- Trains employees to:
  - Answer all incoming calls promptly.
  - o Respond to all inquiries for information promptly and courteously.
  - Investigate thoroughly all customer complaints and handle appropriately according to the Company's guidelines for resolution of customer complaints.
  - Be knowledgeable about products and service offerings so they can assist the customer with selecting the best service option.
- Has a process for periodic inspection, testing and preventive maintenance of its equipment to permit the rendering of safe, adequate and continuous service at all times.
- Meets or exceeds the standards established by the state commission and provides any reports required in accordance with the state commission's rules.

### Consumer Protection Rules

The Company has established procedures designed to facilitate compliance with applicable consumer protection rules: The procedures include:

- Appointment of a compliance officer.
- Documentation of procedures for protecting consumer information.
- Employee training on an annual basis.
- A disciplinary process for improper use of consumer information.

If complaints are filed with the Company regarding consumer protection rules, the complaint is immediately investigated, the matter tracked and any corrective action noted. This process ensures that problems are addressed and corrections made.

### **Allamakee-Clayton Electric Cooperative**

### **Functionality in Emergency Situations**

### **Back-Up Power**

The Company has the following to ensure functionality in case of a commercial power outage.

- Network Switching: Layer 3 network duel switches located at core sites and harden switches at the network edge with Ring or LAG configuration.
- Standby Power Office: Central Office located at office facility has 200 Amp hour batteries and Inverter for 40 hours of run time.
- Standby Power Tower sites: Batteries and Inverter for 24 hours of run time.
- Standby Power Repeater sites: Batteries and Inverter for 24 hours of run time.
- One Standby 100 gal Diesel Generator, 200 KVA-200 KW located at office facility, and fixed generators at Core Tower sites.
- One Standby 30 gal LP Generator, 20 KVA-20 KW located at office facility that could be placed on a trailer, and one gas generators. Generator plugs are located at all tower sites.

### **Rerouting of Traffic around Damaged Facilities**

The network switching is comprised of Layer 3 network switches in duel configuration, located at core sites and harden switches are deployed at the network edge. All switches are in Ring or LAG configuration. We have two network paths out to the internet from two different providers to support our broadband network

### **Traffic Spikes**

Our core broadband switches have the ability to support 10 gigabit uplinks and the edge switches have one gigabit ability to support network traffic

Each of our core switches use OSPF (Open Shortest Path First) that support 10,000 routes and has the capability 5,000 BGP routes (Border Gateway Protocol). We currently have enough capacity to support our current customer base and capacity to support up to an estimated 10,000 more routes or customers.

There is a significant amount of unused switching capacity to support sporadic traffic spikes and the broadband pipe to the world includes enough capacity to carry more data than a normal day.

With both backbone providers we have enough capacity to support our current customer base and add additional customers to the network without any issue. Our network would support five times the customer base.

### Allamakee-Clayton Electric Cooperative Lifeline Terms and Conditions

Allamakee-Clayton Electric Cooperative, ("ACEC") offers Lifeline program-supported service to qualified low-income residential consumers for one telephone line or qualifying broadband internet access service (BIAS) per eligible household. The Lifeline program provides discounts to eligible low-income consumers to help them establish and maintain telephone service or qualifying BIAS Eligible consumers can receive \$9.25 per month in discounts. In addition, the Federal Universal Service Charge is not assessed to consumers participating in Lifeline. Toll blocking prevents the placement of all long distance calls for which a subscriber would be charged. Toll blocking is available to eligible consumers at no cost. Also, by choosing this option, consumers are usually not charged a deposit.

### **Lifeline Program Eligibility Information**

### **Program Based Eligibility**

Consumers are eligible for Lifeline if they, one of their dependents or their household participate in one of the following qualifying assistance programs:

Federal Public Housing Assistance (Section 8)
Supplemental Nutrition Assistance Program (SNAP)
Medicaid
Supplemental Security Income (SSI)
Veteran's Pension and Survivor Benefit

Lifeline applicants must present documentation demonstrating eligibility either through participation in one of the qualifying federal assistance programs or through income-based means.

Acceptable documentation of program-based eligibility includes: current or prior year's statement of benefits from a qualifying state, federal or Tribal program; notice letter of participation in a qualifying state, federal or Tribal program; program participation documents; or another official document evidencing the consumer's participation in a qualifying state, federal or Tribal program.

### **Income Based Eligibility**

In addition, consumers are eligible for Lifeline if their household income is at or below 135% of the federal poverty guidelines.

		40-01
2017 Federal	Poverty Guidelin	es – 135%

Household Size	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$16,281	\$20,331	\$18,711
2	\$21,924	\$27,392	\$25,205
3	\$27,567	\$34,452	\$31,698
4	\$33,210	\$41,513	\$38,192
5	\$38,853	\$48,573	\$44,685
6	\$44.496	\$55,634	\$51,179
7	\$50,139	\$62,694	\$57,672
8	\$55,782	\$69,775	\$64,166
For each additional person, add	\$5,643	\$7,061	\$6,494

Acceptable documentation of income eligibility includes: prior year's state, federal or Tribal tax return; current income statement from an employer or paycheck stub; social security statement of benefits; Veterans Administration statement of benefits; retirement/pension statement of benefits; unemployment/workmen's compensation statement of benefits; federal or Tribal notice of letter participating in General Assistance; or a divorce decree or child support award or other official document containing income information.

### Lifeline Program Service

ACEC's Voice Lifeline service includes unlimited local minutes-of-use within the toll-free calling area. ACEC's Voice Lifeline Plan does not include any free minutes-of-use for toll. Toll is billed at the standard toll rate depending on which interexchange carrier the consumer subscribes to for toll service. As part of the Lifeline service, Toll blocking is available to eligible consumers at no cost.

BIAS minimum speed and usage allowance standards are required for the service to qualify.

Lifeline recipients may transfer the Lifeline benefit to a new company once every sixty days for telephone service and once every 12 months for BIAS.

### **Rates**

Subscribers may receive the Lifeline credit on any type or grade of local service, including bundled services that are normally offered by ACEC. Advertised rates do not include any applicable taxes or surcharges.

### **Recertification of Lifeline Eligibility**

Lifeline recipients are required to recertify their eligibility annually. Failure to properly recertify a recipient's continued eligibility for the Lifeline program will result in termination of the Lifeline recipient's monthly Lifeline discount and de-enrollment from the Lifeline Program.

### **Additional Lifeline Program Information**

The Lifeline program is limited to one benefit per household, consisting of either telephone or BIAS. A household is defined, for purposes of the Lifeline program, as an individual or group of individuals who live together at the same address and share income and expenses. Lifeline is a government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

### **REDACTED - FOR PUBLIC INSPECTION**

FCC Form 481 - Line 4004A

### Allamakee-Clayton Electric Cooperative - SAC 356223

	NECA								Date of	No. of	
15-Digit Census Block	OCN	SAC	Latitude	Longitude	Street Address	City	State	Zip	Deployment	Units	Explanation
					-						

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Get the latest updates on ACEC's community solar project.

A Tauchana Europe Congression A

ACCOUNT SERVICES +

ABOUT US +

ELECTRIC SERVICE •

MEMBER PROGRAMS \*

PRODUCTS +

EFFICIENCY +

RENEWABLES +

SAFETY +

Home » Products » Skyways » Broadband

## Broadband

ACEC Portal Page Open the link and then save the page as your Home Page. Our portal page was designed to be a perfect home page for Northeast lowa residents with quick links to local weather and news as well as national sites.

## AC Skyways Broadband

The Cooperative is building a fiber optic and wireless broadband network in Northeast lowa.

That means you may have access to reliable Internet with speeds of:

- up to 12 MB (satellite)
  up to 25 MB (wireless)
  up to 1 GB (fiber optic)



Satellite Broadband





### Fiber Optics

# **Current AC Skyways Broadband Pricing**

	(MBS)	PRICE
SKYWAYS 5	5/1	8°67 <sub>5</sub>
SKYWAYS 10	10 / 2*	
SKYWAYS 15	15 / 3.	
SKYWAYS BUSINESS PKG (Includes 1 state: P)	20 / 5.	<sup>5</sup> 149. <sup>99</sup>
INSTALLATION (one time charge)		\$1.49.99

increase Upload: 2 Mbs for \$5/month; 5 Mbs for \$10/month

All packages have no limit on usage.

## Accounts include:

- 5 email addresses (@acskyways.com) 250 Mbs mailbox with ability to send or receive messages up to 20 Mbs WebMailঞ Technical supportঞ or toll free 1-855-846-0281

Contact our Skyways division or call (800) 864-1611 for more information or to arrange for installation.